

## **Arizona Recycling Scholarship Program Application and Agreement**

By signing this agreement, both the student and the school agree to implement this project if selected for award. The school agrees to sponsor the senior student participating in this project, monitor and oversee appropriate allocation of funds related to implementing this project. ADEQ agrees to provide the school \$200 for expenses related to this project. The student agrees to implement the project, provide a final report to ADEQ, and provide proof of enrollment in a university or community college within the state of Arizona. Upon completion of this project, as described above, ADEQ will provide the student \$1,000 toward tuition, books and fees. This Agreement incorporates the Arizona Recycling Scholarship Program poster and application package. If this Scholarship Application is selected for award, this Agreement will be executed by ADEQ and a copy will be provided to the school and the student.

Every payment obligation of the State under this agreement is conditioned upon the availability of funds appropriated or allocated for the payment of such obligation. If funds are not allocated and available for the continuance of this agreement, this agreement may be terminated by the State at the end of the period for which funds are available. No liability shall accrue to the State in the event this provision is exercised, and the State shall not be obligated or liable for any future payments or for any damages as a result of termination under this paragraph. Other laws incorporated in this agreement include A.R.S. §35-214 and 35-215, A.R.S. §38-511, Executive Order 99-4, A.R.S. §12-1518. The agreement shall be governed and interpreted by the laws of the state of Arizona.

---

Student Name and Signature

---

Date

---

Student Address / City / State / Zip Code

---

Name of Student's School

**If student is under the age of 18 years, the parent and/or guardian of the student must sign below.**

---

Parent and/or Guardian Name and Signature

---

Date

---

Parent and/or Guardian Address / City / State / Zip Code

---

Telephone

---

Faculty Sponsor Name and Signature

---

Date

---

Name of School / Address / City / State / Zip Code

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ School Tax ID Number: \_\_\_\_\_

---

### **Arizona Department of Environmental Quality**

---

Stephen A. Owens, Director

---

Date